New Program Approval Process

Education Sector Update
October 2017
AGENDA

- Introductions
- Overview of new Program Approval process
- Program Approval Pilot and next steps
Introductions
CASN Overview

Mandate
Lead nursing education and nursing scholarship in the interest of healthier Canadians.

Mission
National voice for nursing education, research, scholarship and promotes high quality nursing education in Canada.

Strategic Directions include:
Support nursing schools and educators to deliver high quality nursing education across the span of nursing.
CASN Team

• Program Approval Contract Manager (liaison with CNO)
  • Joni Boyd

• Program Approval Operations Coordinator (managing operations)
  • Elise Guest

• Program Approval Reviewers (data collection, analysis, and scoring)
  • Jodie Lachance and Janet Nevala

*The CNO Approval project will be distinct from CASN’s accreditation work.
CASN Approach

- Customer service
- Bilingual services
- Communication commitment
- Transparency
- Respect
- Integrity
- Partnership with CNO
Overview of Roles & Responsibilities

- CASN
  - Program Approval administration services: communications, scheduling, conducting interviews, reviewing documentation and evidence, completing scorecard and assessment report

- CNO
  - Sets program approval standards, ensures quality assurance
  - Recommendations to Council

- Council
  - Approval decisions
Program Approval – Objectives

- **Fulfill CNO’s legislative duty** to approve entry-level nursing education programs

- **Promote the safe practice of nursing** by implementing a standardized approval process for all categories and classes of nursing education

- **Foster accountability of nursing education programs** to provide and sustain programs that meet standardized criteria

- Support **continuous evaluation and improvement** of nursing education programs

- **Grant jurisdictional recognition** to nursing education programs

- Provide stakeholders with a **transparent account of program approval**
Principles:
- Regulatory-focused
- Evidence-informed
- Objective
- Transparent
- Sustainable

Program Approval Framework (PAF)
PAF Standard Definitions

• **Structure**: The program’s strategy, policies, procedures and resources support the student’s preparation to meet nursing competencies expected for the category and/or class of registration.

• **Curriculum**: The Program’s curriculum prepares students to meet nursing competencies expected for the category and/or class of registration.

• **Outcome**: The program consistently demonstrates outcomes of preparing graduates to meet nursing competencies expected for the category and/or class of registration.
Prior to December 2016:
- CNO works on indicator development

December 2016:
- Consultants work on document review & jurisdictional scan

January 2017:
- Final draft of indicators for validation

February 2017:
- Consultation with Nurse Educator WG
- 6 validation focus groups*

March 2017:
- Final validated list of indicators with related evidence and data sources

March – April 2017:
- Instrument development
- Indicator weighting validation
- Cut-score study

May – June 2017:
- Cut-score report and recs
- Finalized indicator rubrics

Fall 2017:
- Pilot testing of new process and evaluation tools

*Indicators must meet the following criteria:
- SMART: specific, measurable, appropriate/attainable, relevant/realistic and time-bound
- Supports the principles of program approval: regulatory-focused, evidence-informed, objective, transparent, sustainable, and supports continuous evaluation and improvement
How programs will be evaluated

- Standard process and criteria for all entry-level nursing programs

- Comprehensive review (every 5-7 years) based on:
  - The 3 PAF standards:
    - Program structure
    - Program curriculum
    - Program outcomes; and
  - The associated indicators and evidence sources

- Each indicator has a scoring rubric that determines whether the indicator has been achieved based on the evidence provided:
  - 2 = met
  - 1 = partially met
  - 0 = not met
How the evidence is scored

- Each indicator is separately weighted and contributes to the overall standard weight:
  - Structure: 25%
  - Curriculum: 40%
  - Outcomes: 35%

- The standard weights total to 100%
Program Approval Score

- A sub-set of indicators have been defined as mandatory, from a regulatory perspective, and need to be “met” – a score of 2.

- Approval categories are based on whether the program exceeds the cut score (% of total score), as well as meets the mandatory indicators.
# Table 1 – Program Approval Standards, Indicators and Weights

## Standard 1 – Program Structure

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Weight %</th>
</tr>
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<tbody>
<tr>
<td>1 Nursing program governance: documented accountabilities, responsibilities and processes including collaborative partnerships, with respect to:</td>
<td>6</td>
</tr>
<tr>
<td>1a Collaborative partnerships — the program has signed agreements with each partner</td>
<td></td>
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<td>1b Curriculum development, review and communication that involves faculty/collaborative partners</td>
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<td>1c An annual review of program outcomes that includes review of nursing registration exam results</td>
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<td>2 Client and student safety: to mitigate risk to clients and students, practices and procedures are in place in the following areas:</td>
<td>13</td>
</tr>
<tr>
<td>2a Student supervision in all clinical placements</td>
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<td>2b Orientation of student and clinical faculty to the clinical setting</td>
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<td>2c Regular evaluation of student performance in clinical setting and mechanisms for remediation</td>
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<td>2d Incident-management processes in place to manage safety incidents.</td>
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<td>3 Qualified faculty: qualified faculty resources play an integral role in creating the structure, processes and environment for student learning to obtain the ETP competencies. The following indicators provide a minimal foundation:</td>
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<tr>
<td>3a Faculty are educationally and experientially qualified for the areas in which they teach</td>
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<td>3b Faculty who are RNs, PNs and NPs have no restrictions on the public register</td>
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<td>3c There is an annual process to evaluate teaching or faculty.</td>
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**Total program structure weight** 25%

## Standard 2 – Program Curriculum

<table>
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<tr>
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<tr>
<td>4 The curriculum incorporates ETP competencies and foundational practice standards.</td>
<td>20</td>
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<td>5 Clinical placements and clinical learning opportunities, including simulation experiences, support learners to attain and demonstrate acquisition of program objectives.</td>
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**Total program curriculum weight** 40%

## Standard 3 – Program Outcomes

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<td>8 Registration exam scores — first-time pass rates meet a cut score.</td>
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**Total program outcomes weight** 35%

**Total of Standards 1,2,3 weight** 100%
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| 5 | Clinical placements and clinical learning opportunities, including simulation experiences, support learners to attain and demonstrate acquisition of program objectives. | 9%
| 6 | Processes are in place to communicate student placement expectations to the preceptor for the integrated practicum. | 5%
| 7 | Students are evaluated based on course/learning outcomes, ETP competencies and foundational practice standards. | 6%
| **Total program curriculum weight** | **40%** |
Curriculum Mapping

- Self-assessment process to **identify evidence** that the **curriculum integrates ETP competencies and Foundational Practice Standards**
3 categories of evidence that enables school to demonstrate:

- teaching and learning opportunities that **address theoretical concepts**
- key educational experiences support **application and integration**
- evaluation processes that determine the student’s understanding and **application of knowledge**

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<tr>
<th>RN COMPETENCIES</th>
<th>Theoretical</th>
<th>Application</th>
<th>Evaluation</th>
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<td><strong>Comp. #</strong></td>
<td>Professional Responsibility and Accountability</td>
<td>Source of Evidence (one entry per cell) Maxium 3 Sources of Evidence</td>
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<td>Demonstrates accountability and acceptance of responsibility for one's own actions and decisions</td>
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<td>Recognizes individual competence within legislated scope of practice and seeks support and assistance as necessary</td>
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Approval Categories

- **Approved (Category 1)**
  - Program meets the cut score and mandatory requirements

- **Approved with conditions (Category 2)**
  - Program does not meet the cut score OR any of the mandatory requirements. The program receives recommendations from CNO and develops an action plan to meet requirements within a time frame

- **Not approved (Category 3)**
  - Program fails to meet the cut score OR mandatory indicators over a consecutive number of years and does not demonstrate improvement
Level of Program Approval

- Approval will be granted for each program at the diploma, degree or certificate granting institution level

  Example 1:
  - School A has 3 programs: direct-entry, pre-health specified and compressed
  - School A will receive an approval decision for each program

  Example 2:
  - University A offers a collaborative BScN direct-entry program with two colleges; the same curriculum is offered at the University and the 2 colleges
  - University A will receive the approval decision for the direct-entry program; one score will apply to this program
Documentation Requirements

- Curriculum mapping form and supporting documents
- Indicator evidence submission form and supporting documents
- Attestation form
- The forms and scoring tools are being evaluated as part of the pilot
**Notification**

Programs are notified of full review schedule

**Preparation**

- CASN contacts programs to coordinate the process including scheduling orientations and interviews
- Programs prepare and submit required documentation

**Document review**

- CASN reviews the documentation submitted by programs

**Interviews**

- CASN conducts interviews with program representatives

**Final report**

- CASN completes evidence review, scorecard, and report

**Recommendations**

- CNO assesses report and makes approval recommendations to Council

**Decisions**

- Council makes approval decisions

**Communications**

- CNO communicates Council decisions to programs
- CNO posts approval decisions on CNO’s website
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**Decisions**

Council makes approval decisions

**Communications**

CNO communicates Council decisions to programs
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The Pilot

- **Purpose:**
  - To assess validity and reliability
  - To evaluate the program approval process including:
    - availability and consistency of data collection
    - clarity and ease of use of the documents and forms
    - time, cost and resource implications
    - onsite versus remote interviews
  - To approve the pilot schools

- Feedback collected from schools and assessors

- Evaluation conducted by external evaluation consultants
The Pilot Schools

- Practical Nursing (RPN) Programs
  - George Brown College
  - Georgian College

- Baccalaureate Nursing (RN) Programs
  - Trent University with Fleming College and George Brown College
  - University of New Brunswick at Humber

- Nurse Practitioner (NP) Programs
  - Queen’s University
  - University of Windsor
Pilot Schedule

Milestone dates:

- Documentation due - November 1, 2017
- Assessor interviews – November 2017
- Evaluation survey / interviews – December 2017
- Results – January 2018
- Council recommendations - March 2018
Pilot Evaluation Methods

- Mixed methods
- Inter-rater reliability
  - 2 independent assessments of evidence
    - One assessment by CASN reviewers
    - One assessment by CNO reviewers
- Feedback from schools
  - Online surveys of key informants / participants
- Feedback from assessors
  - Telephone interviews with assessors
Next steps

- Programs will receive the new program approval guidelines
  - Materials will be available in French and English (week of October 9th)

- NP Program Approval – approval deadline Dec 2018
  - Scheduling orientation

- Final documentation and scoring methodology to be provided in early 2018 following pilot

- Development and validation of indicators 9 and 10

- Costing model
## Schedule – Key Dates

<table>
<thead>
<tr>
<th>Deliverable</th>
<th>Schedule</th>
</tr>
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<tr>
<td>Finalize indicators, blueprint, assessment tools, process</td>
<td>Dec 2016 – August 2017</td>
</tr>
<tr>
<td>Communications and preliminary guidebook to schools</td>
<td>Oct 2017</td>
</tr>
<tr>
<td>Pilot test assessment tools and process</td>
<td>Fall 2017</td>
</tr>
<tr>
<td>Start orientation for NP schools</td>
<td>Fall 2017</td>
</tr>
<tr>
<td>Final guidebooks/information package to schools</td>
<td>Feb 2018</td>
</tr>
<tr>
<td>NP PA process begins</td>
<td>Sept 2018</td>
</tr>
<tr>
<td>Baccalaureate PA process begins</td>
<td>Jan 2019</td>
</tr>
<tr>
<td>Practical Nursing (new) PA process begins</td>
<td>Sept 2019</td>
</tr>
</tbody>
</table>
Contact information

- For questions regarding the new program approval process contact:
  - tswabey@cnomail.org

- For questions regarding the current PN program approval process contact:
  - ashin@cnomail.org

- For questions regarding the pilot and pilot administration contact:
  - Eguest@casn.ca
Wrap-up and Questions?